Case 19-24152-JAD Doc 25 Filed 11/21/19 Entered 11/21/19 15:49:47 Desc Main

		DOGHIHE	III Paue Luisu		
Fill in this infor	mation to identify your	case:			
Debtor 1	Gary M. Fieber				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT OF	PENNSYLVANIA		
Case number	19-24152				
(if known)				_	k if this is an nded filing
				•	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file vour original forms, you must fill out a new Summary and check the box at the top of this page.

		Vour	assets
			e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	600,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,455.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	607,455.0
Par	t 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,007,374.40
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	37,044.6
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	240,915.9
	Your total liabilities	\$	1,285,335.02
⊃ar	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,600.0
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,395.0
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your	ır other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	al, family, or

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

6,500.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	37,044.64
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	37,044.64

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		Document	Page 3 of 50	11/21/19 10:48AN

	ormation to identify yo	ui case allu tii	ııs ıııııı	g:						
ebtor 1	Gary M. Fieber									
- l- 1 O	First Name	Middle	Name		Last Name					
ebtor 2 couse, if filing)	First Name	Middle	Name		Last Name					
nited States	Bankruptcy Court for the	: WESTERN	DISTR	RICT OF PEN	NNSYLVANIA					
aa numbar	40.04450								_	
ase number	19-24152									Check if this is a amended filing
fficial F	orm 106A/B									
	ıle A/B: Pro	nerty							1	2/15
nk it fits best. ormation. If m swer every qu	 separately list and desc Be as complete and according space is needed, attallestion. 	urate as possible ich a separate sh	e. If two neet to ti	married peo his form. On	pple are filing togo the top of any ac	ether, both are Iditional pages	e equally resp	ponsible for su	ıpplyin	g correct
	be Each Residence, Build	ing, Land, or Oth		. Lotato Tou (Own or Have an I					
Do you own o	or have any legal or equita									
Do you own o	or have any legal or equita									
Do you own o No. Go to F Yes. When 1 102 Gol	or have any legal or equita	able interest in a	ny resid	t is the prope Single-famil	ng, land, or simila	ar property?	the amour	nt of any secure	d claim	exemptions. Put s on <i>Schedule D:</i> ured by Property.
Do you own o No. Go to F Yes. When 1 102 Gol Street addre	or have any legal or equitary art 2. The is the property? I den Eagle Drive The property of t	able interest in an	what	t is the prope Single-famil Duplex or m Condominiu	ng, land, or similar erty? Check all that a ily home nulti-unit building	ar property?	the amour Creditors Current v	nt of any secure Who Have Clain ralue of the	ed claim ms Sec Curr	s on Schedule D: ured by Property.
Do you own o No. Go to F Yes. When 1 102 Gol	or have any legal or equitary art 2. The is the property? I den Eagle Drive The property of t	able interest in a	what	t is the prope Single-famil Ouplex or m Condominiu Manufacture	erty? Check all that a lily home nulti-unit building um or cooperative	ar property?	Current v	nt of any secure Who Have Clain ralue of the operty?	ed claim ms Sec Curr	s on Schedule D: ured by Property.
Do you own o No. Go to F Yes. When 1 102 Gol Street addre	or have any legal or equitated Part 2. The is the property? I den Eagle Drive less, if available, or other description of the property of the	able interest in a	What	t is the prope Single-famil Duplex or m Condominiu Manufacture Land Investment Timeshare Other has an interes	erty? Check all that a illy home nulti-unit building um or cooperative red or mobile home property	ar property?	Current v entire pro	nt of any secure Who Have Clain ralue of the pperty? 600,000.00 the nature of y	cd claim ms Sec Curr porti	s on Schedule D: ured by Property.
Do you own o No. Go to F Yes. When 1 102 Gol Street addre	or have any legal or equitariant 2. The is the property? I den Eagle Drive I description of the description of the state	able interest in a	What	t is the prope Single-famil Duplex or m Condominiu Manufacture Land Investment Timeshare Other has an interes	erty? Check all that a lily home nulti-unit building um or cooperative red or mobile home property	ar property?	Current v entire pro	ralue of the operty? 600,000.00 the nature of y fee simple, ten	cd claim ms Sec Curr porti	s on Schedule D: ured by Property. ent value of the on you own? \$600,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

	Case	e 19-24152-JAD Do		/21/19 15:49:47	Desc Main 11/21/19 10:48AM
Deb	otor 1 G	ary M. Fieber	Document Page 4 of 50 Car	se number (if known) 19-	24152
3. C	ars, vans,	trucks, tractors, sport utility v	ehicles, motorcycles		
	l No				
	l _{Yes}				
	100				
3.1	Make:	Chevrolet	Who has an interest in the property? Check one		claims or exemptions. Put
	Model:	Impala	■ Debtor 1 only		red claims on Schedule D: aims Secured by Property.
	Year:	2011	Debtor 2 only	Current value of the	Current value of the
		nate mileage: 165,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	on: 102 Golden Eagle	\square At least one of the debtors and another		
		/enetia PA 15367	☐ Check if this is community property (see instructions)	\$4,250.00	\$4,250.00
5 A	pages you	have attached for Part 2. Write be Your Personal and Household I	wn for all of your entries from Part 2, including and that number here		\$4,250.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>E</i>		Various house	s, china, kitchenware hold furnishings including living room, dinir furniture; and kitchen tools and appliances;		
		single item val	ued over \$600.00	110	
		Location: 102	Golden Eagle Drive, Venetia PA 15367		\$1,250.00
		ncluding cell phones, cameras, scribe	deo, stereo, and digital equipment; computers, printer media players, games I phone, and other electronics	s, scanners; music collect	ions; electronic devices
			Golden Eagle Drive, Venetia PA 15367		\$250.00
		Personal comp Location: 102	outer Golden Eagle Drive, Venetia PA 15367		\$200.00
E	Examples: A No Yes. Des	Antiques and figurines; paintings other collections, memorabilia, c	s, prints, or other artwork; books, pictures, or other art ollectibles	objects; stamp, coin, or b	aseball card collections;

Entered 11/21/19 15:49:47 Desc Main Case 19-24152-JAD Doc 25 Filed 11/21/19 Page 5 of 50 Document Case number (if known) 19-24152 Debtor 1 Gary M. Fieber 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal clothing \$400.00 Location: 102 Golden Eagle Drive, Venetia PA 15367 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... Watch, other assorted costume jewelry \$75.00 Location: 102 Golden Eagle Drive, Venetia PA 15367 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,175.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash In debtor's \$30.00 possession

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

■ Yes......Institution name:

Entered 11/21/19 15:49:47 Case 19-24152-JAD Doc 25 Filed 11/21/19 Desc Main Document Page 6 of 50 Case number (if known) 19-24152 Debtor 1 Gary M. Fieber 17.1. Checking Citizens Bank \$400.00 Citizens Bank \$550.00 17.2. Checking **Key Bank** \$50.00 Savings 17.3. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No ☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☐ Yes. Give specific information about them...

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Debtor 1 Gary M. Fieber Page 7 of 50
Case number (if known) 19-24152

Current value of the portion you own?
Do not deduct secured

Mon	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
00 1	Tour making de annual de mann	
	Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years	
	Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property of INO I Yes. Give specific information	settlement
•	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compen benefits; unpaid loans you made to someone else No Yes. Give specific information	sation, Social Security
	nterests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	ce
_	I_{N_0}	
	1 Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary:	Surrender or refund value:
•	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to rece someone has died. No Yes. Give specific information	ive property because
	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	
	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to No I Yes. Describe each claim	set off claims
	Any financial assets you did not already list No I Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	\$1,030.00
Part	5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.	
27 1	o you own or have any legal or equitable interest in any business-related property?	
	No. Go to Part 6.	
Ц	Yes. Go to line 38.	
Part	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.	

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Desc Main Case 19-24152-JAD Doc 25 Filed 11/21/19 Entered 11/21/19 15:49:47 Document Page 8 of 50 Case number (if known) 19-24152 Debtor 1 Gary M. Fieber ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$600,000.00 Part 2: Total vehicles, line 5 \$4,250.00 57. Part 3: Total personal and household items, line 15 \$2,175.00 Part 4: Total financial assets, line 36 58. \$1,030.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... \$7,455.00 Copy personal property total \$7,455.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$607,455.00

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Fill in this infor	rmation to identify your				
Debtor 1	Gary M. Fieber				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA		
Case number	19-24152				
(if known)	13-24132				☐ Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt	

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.								
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)							
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.								
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.					
	Various household furnishings	\$1,250.00		\$1,250.00	11 U.S.C. § 522(d)(3)				
	including living room, dining room and bedroom furniture; and kitchen tools and appliances; no single item valued over \$600.00 Location: 102 Golden Eagle Drive, Venetia PA 15367 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Television, cell phone, and other electronics	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)				
	Location: 102 Golden Eagle Drive, Venetia PA 15367 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit					
	Personal computer Location: 102 Golden Eagle Drive,	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)				
	Venetia PA 15367 Line from Schedule A/B: 7.2			100% of fair market value, up to any applicable statutory limit					
	Personal clothing Location: 102 Golden Eagle Drive,	\$400.00 ■		\$400.00	11 U.S.C. § 522(d)(3)				
	Venetia PA 15367 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit					

Case 19-24152-JAD Doc 25 Filed 11/21/19 Entered 11/21/19 15:49:47 Desc Main . /21/19 10:48AM Document Page 10 of 50 Gary M. Fieber Case number (if known) Debtor 1 19-24152 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Watch, other assorted costume 11 U.S.C. § 522(d)(4) \$75.00 \$75.00 **jewelry** 100% of fair market value, up to Location: 102 Golden Eagle Drive, Venetia PA 15367 any applicable statutory limit Line from Schedule A/B: 12.1 Cash 11 U.S.C. § 522(d)(5) \$30.00 \$30.00 In debtor's possession Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Citizens Bank** 11 U.S.C. § 522(d)(5) \$400.00 \$400.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Citizens Bank** 11 U.S.C. § 522(d)(5) \$550.00 \$550.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: Key Bank 11 U.S.C. § 522(d)(5) \$50.00 \$50.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit djustment.)

3.	Are you claiming a homestead exemption of more than \$170,350?
	(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of a
	■ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Yes

Ca	ase 19-24152-JAD	Doc 25 Filed		intered 11/21/19 15 11 of 50	5:49:47 De	esc Main 11/21/19 10:48AF
Fill in this i	nformation to identify your					
Debtor 1	Gary M. Fieber					
D. I	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United State	es Bankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVAI	NA		
Case number	er 19-24152					
(if known)						eck if this is an ended filing
Schedu	orm 106D Lile D: Creditors					12/15
	te and accurate as possible. If py the Additional Page, fill it o own).					
•	ditors have claims secured by	your property?				
□ No. 0	Check this box and submit th	is form to the court with y	our other schedules	s. You have nothing else to r	eport on this form	l.
■ Yes.	Fill in all of the information b	elow.				
Part 1: L	ist All Secured Claims					
	cured claims. If a creditor has m			itely	Column B	Column C
	n. If more than one creditor has sible, list the claims in alphabetic			Do not deduct the	/alue of collateral hat supports this claim	Unsecured portion If any
2.1 Credi	t Acceptance Corp.	Describe the property that	secures the claim:	\$5.137.96	\$4,250.00	\$887.96

			value of collateral.	claim	If any
2.1 Credit Acceptance Corp.	Describe the property that secures	the claim:	\$5,137.96	\$4,250.00	\$887.9
Creditor's Name	2011 Chevrolet Impala 165, Location: 102 Golden Eagle				
	Venetia PA 15367				
PO Box 551888	As of the date you file, the claim is: apply.	Check all that			
Detroit, MI 48255	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	An agreement you made (such as	mortgage or seco	ured		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	Security Ag	greement		
Date debt was incurred	Last 4 digits of account num	nber			

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Deb	tor 1 Gary M. Fieber		Case number (if known)	19-24152	
	First Name Middle N	lame Last Name			
2.2	Peters Twp School District	Describe the property that secures the claim:	\$51.00	\$600,000.00	\$51.00
	Creditor's Name	102 Golden Eagle Drive Venetia, PA 15367 Washington County			
	E. McMurray Road McMurray, PA 15317	As of the date you file, the claim is: Check all that apply. Contingent	t t		
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
	ebtor 1 only ebtor 2 only	☐ An agreement you made (such as mortgage o car loan)	r secured		
_	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lier	n)		
ПΑ	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	theck if this claim relates to a community debt	Other (including a right to offset) Municip	oal Lien		
Date	debt was incurred	Last 4 digits of account number			
2.3	Peters Twp School District	Describe the property that secures the claim:	\$6,501.60	\$600,000.00	\$6,501.60
	Creditor's Name	102 Golden Eagle Drive Venetia, PA 15367 Washington County			
	E. McMurray Road McMurray, PA 15317	As of the date you file, the claim is: Check all that apply.	ıt		
	Number, Street, City, State & Zip Code	Contingent			
Who	owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only	☐ An agreement you made (such as mortgage o	r secured		
	ebtor 2 only	car loan)	1 0004104		
	ebtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lier	n)		
ПΑ	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	theck if this claim relates to a community debt	Other (including a right to offset)			
Date	debt was incurred 2008-2011	Last 4 digits of account number			
2.4	Select Portfolio Servicing	Describe the property that secures the claim:	\$995,683.84	\$600,000.00	\$395,683.84
	Creditor's Name	102 Golden Eagle Drive Venetia, PA 15367 Washington County			
	P.O. Box 65250	As of the date you file, the claim is: Check all that apply.	t		
	Salt Lake City, UT 84165 Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated			
Who	owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	ebtor 1 only	☐ An agreement you made (such as mortgage o	r secured		
	ebtor 2 only	car loan)			
_	ebtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lier	n)		
_	t least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a community debt	Other (including a right to offset) Mortga	ge		
Date	debt was incurred	Last 4 digits of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,007,374.40

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Debto	r 1 Gary M. Fieber			Case number (if known)	19-24152
	First Name	Middle Name	Last Name		
	s is the last page of your that number here:	form, add the dollar va	llue totals from all pages.	\$1,007,374	.40
Part 2	List Others to Be N	otified for a Debt Th	nat You Already Listed		
trying t	to collect from you for a	debt you owe to somed debts that you listed in	one else, list the creditor in Part	1, and then list the collection age	or example, if a collection agency is ncy here. Similarly, if you have more tional persons to be notified for any
	Name, Number, Street, Cit James C. Warmbro KML Law Group, Po 701 Market Street, S	dt, Esquire C		On which line in Part 1 did you ento	
	Philadelphia, PA 19				
	Name, Number, Street, Cit Jeffrey R. Hunt, Est Goehring Rutter & I 437 Grant St., 14th Pittsburgh, PA 152	quire Boehm Floor		On which line in Part 1 did you ento	
	Name, Number, Street, Cit Jeffrey R. Hunt, Est Goehring Rutter & I 437 Grant St., 14th Pittsburgh, PA 152	quire Boehm Floor		On which line in Part 1 did you entotal Last 4 digits of account number	

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Page 14 of 50 Document Fill in this information to identify your case: Debtor 1 Gary M. Fieber Middle Name Last Name Debtor 2 Middle Name (Spouse if, filing) First Name Last Name WESTERN DISTRICT OF PENNSYLVANIA United States Bankruptcy Court for the: Case number 19-24152 (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) **Total claim** Priority Nonpriority amount amount 2.1 **Internal Revenue Service** Last 4 digits of account number \$11,206.02 \$11,206.02 \$0.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset?

■ No

☐ Yes

☐ Other. Specify

Income tax

Entered 11/21/19 15:49:47 Case 19-24152-JAD Doc 25 Filed 11/21/19 **Desc Main** Document Page 15 of 50 Debtor 1 Gary M. Fieber ase number (if known) 19-24152 2.2 PA Department of Revenue Last 4 digits of account number \$25,838.62 \$21,848.87 \$3,989.75 Priority Creditor's Name **Bankruptcy Division** When was the debt incurred? 2008, 2009, 2010, 2015 PO Box 280946 Harrisburg, PA 17128 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ Claims for death or personal injury while you were intoxicated ■ No Other. Specify ☐ Yes Income tax Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? \square No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.lf you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 **ANS Landscaping** Last 4 digits of account number \$790.00 Nonpriority Creditor's Name 2150 Washington Road When was the debt incurred? Canonsburg, PA 15317 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

■ Other. Specify Services

☐ Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

■ No

☐ Yes

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Page 16 of 50 Case number (if known) Debtor 1 Gary M. Fieber 19-24152 4.2 **Capital One** Last 4 digits of account number 3613 \$819.26 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Various personal and household items ☐ Yes 4.3 **Equitable Gas Company** \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Judy Gawlowski When was the debt incurred? 200 Allegheny Center Pittsburgh, PA 15212 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Utility ☐ Yes 4.4 **Internal Revenue Service** Last 4 digits of account number \$215,748.31 Nonpriority Creditor's Name When was the debt incurred? PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Income tax ☐ Yes

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\$5,731.00	Last 4 digits of account number	John T. Burns. Esquire	4.5
	When was the debt incurred?	Nonpriority Creditor's Name Burns Law Office 14300 Nicollett Court Burnsville, MN 55306	
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	Debtor 2 only	
	Disputed	☐ Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another	
	☐ Student loans	☐ Check if this claim is for a community	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	☐ Debts to pension or profit-sharing plans, and other similar debts	No	
	Other. Specify Fees	Yes	
\$235.00	Last 4 digits of account number 3908	MedExpress Billing	4.6
	When was the debt incurred?	Nonpriority Creditor's Name PO Box 7964 Polifort ME 04045	
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	Debtor 2 only	
	□ Disputed	Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another	
	☐ Student loans	☐ Check if this claim is for a community	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	Debts to pension or profit-sharing plans, and other similar debts	■ No	
	Other. Specify Medical services	Yes	
\$7,990.00	Last 4 digits of account number	PA American Water	4.7
	When was the debt incurred?	Nonpriority Creditor's Name PO Box 371412 Pittsburgh, PA 15250	
	As of the date you file, the claim is: Check all that apply	Number Street City State Zip Code Who incurred the debt? Check one.	
	☐ Contingent	Debtor 1 only	
	☐ Unliquidated	Debtor 2 only	
	Disputed	☐ Debtor 1 and Debtor 2 only	
	Type of NONPRIORITY unsecured claim:	☐ At least one of the debtors and another	
	☐ Student loans	☐ Check if this claim is for a community	
	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	debt Is the claim subject to offset?	
	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	■ No	
	■ Other. Specify Utility	☐ Yes	

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Debtor 1	Gary M. I	Fieber		Case no	imber (if knowi	n) 19-24152	
	West Penn		Last 4 digits of account numb	er			\$8,402.41
	Nonpriority Cre 800 Cabin I	Hill Drive	When was the debt incurred?				
		g, PA 15606 City State Zip Code	As of the date you file, the clai	i m is: Check	all that apply		
		the debt? Check one.	,				
	Debtor 1 on	ly	☐ Contingent				
	Debtor 2 on	ly	☐ Unliquidated				
	Debtor 1 an	d Debtor 2 only	☐ Disputed				
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecu	ıred claim:			
	☐ Check if th	is claim is for a community	☐ Student loans				
	debt	shipat to officiat?	Obligations arising out of a s	eparation ag	reement or div	orce that you did not	
	_	bject to offset?	report as priority claims Debts to pension or profit-sha	aring plane	and other cimil	ar dobte	
	■ No		·	aring plans,	and other simil	ai debis	
	☐ Yes		Other. Specify Utility				
Part 3:	List Other	s to Be Notified About a De	ebt That You Already Listed				
is tryin have m	g to collect from	om you for a debt you owe to s	about your bankruptcy, for a debt the omeone else, list the original credito at you listed in Parts 1 or 2, list the a or submit this page.	r in Parts 1	or 2, then list	the collection agency her	e. Similarly, if you
	d Address	v Associates	On which entry in Part 1 or Part 2 did y		•		
	rporate Blv	y Associates	Line 4.2 of (Check one):			Priority Unsecured Claims	
Suite 1		u		Part 2:	Creditors with I	Nonpriority Unsecured Clair	ns
Norfoll	k, VA 23502	!	Last 4 digits of account number				
			_				
	d Address Debt Mange	ement	On which entry in Part 1 or Part 2 did y Line 4.2 of (<i>Check one</i>):		•	? Priority Unsecured Claims	
PO Bo			Line 412 of (Officer Offic).			Nonpriority Unsecured Clair	ne
Norcro	ss, GA 300	91	Last 4 diales of account accomban	— Fait 2.	Creditors with	Nonphonty onsecured Clair	15
			Last 4 digits of account number				
	d Address	liaa 🗆	On which entry in Part 1 or Part 2 did y	·	•		
	torneys Of n District o		Line 2.1 of (Check one):			Priority Unsecured Claims	
4000 U	.S. Post Of	fice & Courthouse		□ Part 2:	Creditors with I	Nonpriority Unsecured Clair	ns
	ant Street	040					
Pittsbu	irgh, PA 15	219	Last 4 digits of account number				
Part 4:	Add the A	mounts for Each Type of U	nsecured Claim				
	he amounts of unsecured cla		aims. This information is for statistica	al reporting	purposes on	ly. 28 U.S.C. §159. Add the	amounts for each
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					1	Total Claim	
	6a.	Domestic support obligation	ıs	6a.	\$	0.00	
Total							
claims from Par	t 1 6b.	Taxes and certain other deb	ts you owe the government	6b.	\$	37,044.64	
	6c.	Claims for death or persona	l injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority un	secured claims. Write that amount here	e. 6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$	37,044.64	
					-	Total Claim	ı
	6f.	Student loans		6f.	\$	Total Claim 0.00	
Total							
claims from Par	t 2 6g.	Obligations arising out of a	separation agreement or divorce that		•	0.00	
	6h.	you did not report as priority Debts to pension or profit-si	y claims haring plans, and other similar debts	6g. 6h.	\$ \$	0.00	
	5.1.	p v. p. v. t. v.	5 , , c cobto		Ψ	0.00	

Other. Add all other nonpriority unsecured claims. Write that amount

6i.

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Page 19 of 50 Case number (if known) Debtor 1 Gary M. Fieber 19-24152

Total Nonpriority. Add lines 6f through 6i. 240,915.98

Schedule E/F: Creditors Who Have Unsecured Claims Official Form 106 E/F

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			III FAUE ZU UI SU	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Gary M. Fieber			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	19-24152			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	<u> </u>		0.0.0	2 0000	
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5	,				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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		Documer	<u>nt Page 21 c</u>	of 50	11/21/19 10.40AW
Fill in this	information to identify your	case:			
Debtor 1	Gary M. Fieber				
Dobto. 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	WESTERN DISTRICT O	F PENNSYLVANIA		
Case numb	per 19-24152				
(if known)	19-24132				☐ Check if this is an
					amended filing
~	. =				
	l Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
our name	and case number (if known)	. Answer every question.	· ·	o this page. On the top of any	Additional Pages, write
1. роз	you have any codebtors? (If	you are filing a joint case, d	o not list either spouse	as a codeptor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana			y? (Community property states ington, and Wisconsin.)	and territories include
■ No.	Go to line 3.				
☐ Yes	. Did your spouse, former spor	use, or legal equivalent live	with you at the time?		
in line Form	2 again as a codebtor only i	f that person is a guarante	or or cosigner. Make	if your spouse is filing with y sure you have listed the credi 16G). Use Schedule D, Schedu	itor on Schedule D (Official
(Column 1: Your codebtor			Column 2: The creditor to	whom you owe the debt
N	Name, Number, Street, City, State and Z	IP Code		Check all schedules that a	ipply:
3.1				☐ Schedule D, line	
	Name			Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to identify your ca	ase:									
Deb	otor 1 Gary M. Field	per									
	otor 2					_					
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	Γ OF PENNS	YLVANIA		_					
	se number		-						ed filing ent showin	ng postpetition	chapter
O	fficial Form 106I						_			ollowing date:	
	chedule I: Your Inc	ome					I	MM / DD/ Y	7 Y Y Y		12/1
sup spo atta	s complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing w	ng jointly, an ith you, do n	d your spo ot include	use i inforr	s liv natio	ing with on abou	you, incl t your spo	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1					Debtor 2	2 or non-fi	iling spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employ	ed				☐ Empl	oyed		
	information about additional		☐ Not employed				☐ Not e	mployed			
	employers.	Occupation	Consulta	nt							
	Include part-time, seasonal, or self-employed work.	Employer's name	Gary Fiel	ber Consu	ulting	J					
	Occupation may include student or homemaker, if it applies.	Employer's address		en Eagle PA 15367)					
		How long employed t	here? _	10 years				_			
Par	t 2: Give Details About Mor	nthly Income									
spou If yo	mate monthly income as of the dause unless you are separated. u or your non-filing spouse have most space, attach a separate sheet to	ore than one employer, co					yers for	that perso	on on the li	nes below. If	
							For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overt	ime pay.			3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lir	ne 2 + line 3.			4.	\$		0.00	\$	N/A	

Debt	tor 1	Gary M. Fieber	-	C	ase r	number (if known)	19-	-24152		
	0	and the second s	4			Debtor 1	no	or Debtor on-filing s	spouse	
	Cop	y line 4 here	4.		\$	0.00	\$		N/A	<u>. </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	0.00	\$		N/A	<u>. </u>
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$	0.00	\$		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$	0.00	\$ \$		N/A N/A	_
	5g.	Union dues	5g		\$ —	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	5h		\$	0.00			N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	0.00	\$		N/A	_
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ \$	0.00	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ı .	\$	6,500.00	\$		N/A	_
	8b.	Interest and dividends	8b	١.	\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	0.00	\$		N/A	<u>.</u>
	8d.	Unemployment compensation	8d	l.	\$	0.00	\$		N/A	_
	8e.	Social Security	8e	٠.	\$	2,100.00	\$		N/A	<u>. </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$	0.00	\$ \$		N/A N/A	_
	8h.	Other monthly income. Specify:	8h		\$ 	0.00			N/A	_
			_			0.00	Ė			<u>-</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		8,600.00	\$		N/A	A
10.	Cald	culate monthly income. Add line 7 + line 9.	10.	\$	8	3,600.00 + \$		N/A	= \$	8,600.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1 L`_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the contributions of the contribution o	depe		,		,	Schedule	e <i>J</i> . +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certain ies							\$	8,600.00
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?						Combi month	ned ly income
	=	No.								

	Alain in face	diam to identify							
		ation to identify yo							
Debto	or 1	Gary M. Fieb	oer					this is:	
Debto	or 2						•	amended filing	ving postpetition chapter
	use, if filing)								the following date:
								•	
Unite	d States Bankı	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA		MN	// DD / YYYY	
		9-24152							
(If kno	own)								
Off	ficial Fo	rm 106J							
		J: Your	Evner	1606					12/1
Be a infor num	s complete rmation. If m ber (if know	and accurate as nore space is ne n). Answer eve	s possible eded, atta ry questio	. If two married people ar ich another sheet to this					or supplying correct
Part 1.	Is this a join	ribe Your House nt case?	∌noia						
	■ No. Go to		in a separ	ate household?					
	□N	lo	·	al Form 106J-2, <i>Expen</i> ses	for Separate Househ	old of D	ebtor	2.	
2.	Do vou hav	e dependents?	■ No						
	Do not list D Debtor 2.	-	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2			Dependent's age	Does dependent live with you?
	Do not state	the							□ No
	dependents								☐ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
									□ No
									☐ Yes
3.	expenses o	penses include of people other t d your depende	than 👝	No Yes					
expe	mate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp					
the v		h assistance an		government assistance it cluded it on <i>Schedule I: Y</i>				Your expe	enses
		or home owners		ses for your residence. In	nclude first mortgage	4.	\$_		0.00
	If not include	ded in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
		erty, homeowner's	s, or renter	's insurance		4b.			0.00
		•		pkeep expenses		4c.			250.00
		owner's associa				4d.	· : —		0.00
5				our residence, such as ho	me equity loans	5			0.00

Debtor 1 Gary	M. Fieber	Case num	ber (if known)	19-24152
6. Utilities:				
	city, heat, natural gas	6a.	\$	240.00
	sewer, garbage collection	6b.	\$	80.00
	none, cell phone, Internet, satellite, and cable services	6c.	•	440.00
	Specify:	6d.	·	0.00
	pusekeeping supplies	7.	·	500.00
	nd children's education costs	8.	\$	0.00
		9.	\$	
-	undry, and dry cleaning re products and services	10.	\$	100.00
	•			80.00
	dental expenses	11.	\$	0.00
	ion. Include gas, maintenance, bus or train fare. le car payments.	12.	\$	250.00
	ent, clubs, recreation, newspapers, magazines, and books	13.	·	150.00
		14.	•	
	ontributions and religious donations	14.	Ψ	0.00
5. Insurance.	do incurance deducted from your pay or included in lines 4 or 20			
15a. Life ins	de insurance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
15b. Health			•	0.00
		15b.	·	115.00
15c. Vehicle		15c.		190.00
	insurance. Specify:	15d.	\$	0.00
	ot include taxes deducted from your pay or included in lines 4 or 20.		•	_
Specify:		16.	\$	0.00
	or lease payments:		_	
	syments for Vehicle 1	17a.	·	0.00
	lyments for Vehicle 2	17b.	•	0.00
17c. Other.	Specify:	17c.	\$	0.00
17d. Other.	Specify:	17d.	\$	0.00
	nts of alimony, maintenance, and support that you did not report as		_	0.00
	om your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	·	0.00
 Other payme 	ents you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	roperty expenses not included in lines 4 or 5 of this form or on Sch			
20a. Mortga	ages on other property	20a.	\$	0.00
20b. Real e	state taxes	20b.	\$	0.00
20c. Proper	rty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Mainte	enance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeo	owner's association or condominium dues	20e.	\$	0.00
1. Other: Speci	ifv·	21.	·	0.00
Canon Opcor	····		· Ψ	0.00
Calculate yo	our monthly expenses			
22a. Add line	es 4 through 21.		\$	2,395.00
22b. Copy lin	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>
	22a and 22b. The result is your monthly expenses.		\$	2,395.00
				2,333.00
3. Calculate yo	our monthly net income.			
23a. Copy I	ine 12 (your combined monthly income) from Schedule I.	23a.	\$	8,600.00
	your monthly expenses from line 22c above.	23b.	-\$	2,395.00
.,,	· ·			_,
23c. Subtra	act your monthly expenses from your monthly income.			
	sult is your monthly net income.	23c.	\$	6,205.00
	•			
	ect an increase or decrease in your expenses within the year after y			
	do you expect to finish paying for your car loan within the year or do you expect you	ır mortgage ı	payment to incre	ease or decrease because of
	the terms of your mortgage?			
■ No.				
☐ Yes.	Explain here:			

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riii in this into	ormation to identify your	case:			
Debtor 1	Gary M. Fieber				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case number	19-24152				
(if known)				-	ck if this is an nded filing
You must file to be taining mon years, or both.	his form whenever you fi	le bankruptcy schedules n connection with a banl		ct information. laking a false statement, conceali fines up to \$250,000, or imprisonn	
31	gii below				
Did you p	pay or agree to pay some	one who is NOT an attor	ney to help you fill out bar	nkruptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Petition F Declaration, and Signature (•

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and

Official Form 106Dec

Signature of Debtor 2

Date

that they are true and correct.

Date November 21, 2019

X /s/ Gary M. Fieber

Gary M. Fieber Signature of Debtor 1

	in this inforn	nation to identify you	r case:			
Del	btor 1	Gary M. Fieber First Name	Middle Name	Last Name		
Del	btor 2	i iist ivailie	widdle Name	Last Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Ca	se number	19-24152				
(if kr	nown)				_	theck if this is an mended filing
~ .	···	407				
	ficial Fo		Affaira fan Indivis	luala Filina fan D		
			Affairs for Individ			4/19
info	rmation. If m		attach a separate sheet to		equally responsible for sup additional pages, write you	
	<u> </u>	, , , ,	arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	■ Married □ Not mar	rried				
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	-					
	■ No □ Yes. Lis	st all of the places you I	lived in the last 3 years. Do no	ot include where you live now	·.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory co, Texas, Washington and W	
	■ No					
	_	ake sure vou fill out <i>Sci</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
		•	,	,		
Pai	rt 2 Explai	in the Sources of You	r Income			
4.	Fill in the tota	al amount of income yo	mployment or from operating our received from all jobs and a have income that you receive	ill businesses, including part-		ndar years?
	□ No					
		I in the details.				
	— 163.1111	i iii tiie detaiis.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$65,000.00	☐ Wages, commissions, bonuses, tips	
			Operating a business		☐ Operating a business	

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Debtor 1 Gary M. Fieber

				Debtor 1					Debtor 2		
					of income that apply.	(be	oss income fore deductions and lusions)		Sources of inco Check all that ap		Gross income (before deductions and exclusions)
	For last calendar year: (January 1 to December 31, 2018)		☐ Wages bonuses,	s, commissions, tips		\$78,000.00		☐ Wages, comm bonuses, tips	nissions,		
				■ Opera	ting a business				☐ Operating a b	usiness	
		dar year bef December 3		☐ Wages bonuses,	s, commissions, tips		\$100,000.00		☐ Wages, comm bonuses, tips	nissions,	
				■ Opera	ting a business				☐ Operating a b	usiness	
5.	Include include and other winnings. List each s	come regard public benef If you are fili	less of wheth it payments; ng a joint cas he gross inco	er that inco pensions; r e and you l	ome is taxable. Exa ental income; intel nave income that y	amples rest; div you rec	ous calendar years of other income are vidends; money coll seived together, list i	e alin lected it onl	d from lawsuits; ro y once under Deb	oyalties; and otor 1.	ecurity, unemploymen I gambling and lottery
				Debtor 1 Sources of Describe	of income pelow.	eac (be	oss income from h source fore deductions and lusions)		Debtor 2 Sources of inco Describe below.	me	Gross income (before deductions and exclusions)
		1 of currer iled for ban	nt year until kruptcy:	Social S Benefits			\$21,000.00	0			
	r last calen nuary 1 to	dar year: December :	31, 2018)	Social S Benefits			\$25,200.00	0			
Da	rt 3: List	Cortain Pa	vments Vou	Made Befo	ore You Filed for	Rankri	intev				
6.					imarily consume						
Ο.	□ No.	Neither De	btor 1 nor D	ebtor 2 ha	•	umer d	ebts. Consumer de	ebts a	are defined in 11 L	J.S.C. § 101	(8) as "incurred by ar
		•	90 days befo	re you filed	for bankruptcy, di	id you p	pay any creditor a to	otal o	of \$6,825* or more	?	
		□ No.	Go to line 7								
		Yes	paid that cre not include	editor. Do n payments t	ot include paymer o an attorney for t	nts for o		oligat	ions, such as chil	d support ar	e total amount you nd alimony. Also, do
	Yes.	Debtor 1 o	r Debtor 2 o	r both have	e primarily consu	ımer d				a c, ac	
		■ No.	Go to line 7								
		□ Yes		ments for d	omestic support o		al of \$600 or more a ons, such as child su				creditor. Do not nclude payments to ar
	Creditor'	s Name and	l Address		Dates of payme	ent	Total amount			Was this p	ayment for
							paid		still owe		

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7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.						
	☐ Yes. List all payments to an insider. Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for the	nis payment	
3.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosi		paid nents or transfer a	still owe	ccount of a dek	ot that benefited an	
	☐ Yes. List all payments to an insider						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite		
Par	t 4: Identify Legal Actions, Repossession Within 1 year before you filed for bankrupto		v lawsuit, court ac	tion, or administr	ative proceedir	na?	
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.						
	Case title Case number	Nature of the case	Court or agency		Status of the	case	
	Deutsche Bank vs. Gary M. Fieber 2012-5416	Mortgage foreclosure	Washington Co of Common Ple 1 S Main Street Washington, P.	eas	■ Pending □ On appea □ Concluded		
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		rty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied? Value of the property	
		Explain what happened				p. span y	
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any an	nounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount	
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or all ■ No □ Yes		rty in the possess	ion of an assigned	e for the benef	it of creditors, a	

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Debtor 1 Gary M. Fieber

Pa	rt 5: List Certain Gifts and Contributions			
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gifts with a total value of more tl	han \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for bankrup No	otcy, did you give any gifts or contributions with a tota	l value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or cor	ntribution.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	tal Describe what you contributed	Dates you contributed	Value
Pa	rt 6: List Certain Losses			
15.	Within 1 year before you filed for bankrupt or gambling? ■ No	cy or since you filed for bankruptcy, did you lose anyt	hing because of the	t, fire, other disaster
	☐ Yes. Fill in the details.			
	how the loss occurred	Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pa	consulted about seeking bankruptcy or pr	ccy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required		rty to anyone you
	□ No			
	Yes. Fill in the details.			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Thompson Law Group, P.C. 125 Warrendale-Bayne Road Suite 200 Warrendale, PA 15086 bthompson@thompsonattorney.com	Attorney Fees	October 21, 2019	\$1,200.00
	Cricket Debt Counseling	Prefiling credit counseling	October 24, 2019	\$24.00
17.	promised to help you deal with your credit Do not include any payment or transfer that you	ccy, did you or anyone else acting on your behalf pay of cors or to make payments to your creditors? ou listed on line 16.	or transfer any prope	rty to anyone who
	No			
	Yes. Fill in the details.			
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Debtor 1 Gary M. Fieber

18.	Within 2 years before you filed for bankrupte transferred in the ordinary course of your bull include both outright transfers and transfers mainly gifts and transfers that you have already	usiness or financial affa ade as security (such as t	airs? the granting of a				
	No Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v		payme	ibe any property or ents received or debts	Date transfer wa	IS
	Person's relationship to you			paid if	n exchange		
19.	 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) No 					of which you are a	ì
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer w	as
Par	rt 8: List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Unit	s		
20	Within 1 year before you filed for bankrupto	v were any financial ac	counts or inst	ruments he	ld in your name, or for v	our benefit, closed	4.
-0.	sold, moved, or transferred? Include checking, savings, money market, o	•				·	-
	houses, pension funds, cooperatives, associ	ciations, and other finar	ncial institution	ıs.			
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balan before closing trans	or
21.	Do you now have, or did you have within 1 y cash, or other valuables?	ear before you filed for	bankruptcy, a	ny safe dep	oosit box or other depos	itory for securities	i,
	■ No						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit of	or place other than your	home within 1	year befor	e you filed for bankrupto	cy?	
	■ No						
	☐ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or I to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Dar	rt 9: Identify Property You Hold or Control	for Someone Fise					
	Do you hold or control any property that sor		ude any proper	rty you borr	owed from, are storing f	for, or hold in trus	t
	■ No						
	☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Val	ue
Par	rt 10: Give Details About Environmental Info	,					

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 Gary M. Fieber

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance

regulations controlling the cleanup of these substances, wastes, or material.

	hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	all notices, releases, and proceedings that	at you know about, regardless of when	the	y occurred.				
24.	Has	any governmental unit notified you that	you may be liable or potentially liable	und	er or in violation of an environme	ental law?			
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice			
25.	Hav	ve you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site Idress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmental law, if you know it	Date of notice			
26.	Hav	ve you been a party in any judicial or adn	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	nd orders.			
		No							
		Yes. Fill in the details.							
	Case Title Case Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrupt	cv. did vou own a business or have an	v of	the following connections to any	business?			
		■ A sole proprietor or self-employed in	• •	•					
		☐ A member of a limited liability comp			-				
		☐ A partner in a partnership		. `	,				
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation						
		No. None of the above applies. Go to F	Part 12.						
		Yes. Check all that apply above and fill		.					
	Ad	siness Name dress	Describe the nature of the business		Employer Identification number Do not include Social Security	number or ITIN.			
	(Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper		Dates business existed				
28.		hin 2 years before you filed for bankrupt titutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	de all financial			
		No							
		Yes. Fill in the details below.							
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued						
		<u>_</u>							

Part 12: Sign Below

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are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Gary M. Fieber Signature of Debtor 2 Gary M. Fieber Signature of Debtor 1 Date November 21, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Fill in this inform	Fill in this information to identify your case:				
Debtor 1	Gary M. Fieber				
Debtor 2 (Spouse, if filing)					
United States B	Bankruptcy Court for the: Western District of Pennsylvania				
Case number (if known)	19-24152				

ľ	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
		1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
		3. The commitment period is 3 years.					
		4. The commitment period is 5 years.					
	☐ Check if this is an amended filing						

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 6,500.00 0.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

19-24152

Gary M. Fieber Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you____ 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 6,500.00 0.00 6,500.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 6.500.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 6,500.00 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 6.500.00 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 78,000.00 15b. The result is your current monthly income for the year for this part of the form.

Debtor 1

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Case 19-24152-JAD Doc 25 Page 36 of 50 Document Gary M. Fieber 19-24152 Debtor 1 Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: PA 16a. Fill in the state in which you live. 2 16b. Fill in the number of people in your household. 66.649.00 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 6.500.00 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 6,500.00 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 6,500.00 20a. Copy line 19b Multiply by 12 (the number of months in a year). **x** 12 78,000.00 \$ 20b. The result is your current monthly income for the year for this part of the form 66,649.00 20c. Copy the median family income for your state and size of household from line 16c \$ 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.

Part 4:

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ Gary M. Fieber

Gary M. Fieber

Signature of Debtor 1

Date November 21, 2019

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in	n this info	rmation to iden	tify your	case:													
Debt	or 1	Gary M. Fieb	er														
Debte	or 2 use, if filing	j)															
Unite	d States B	ankruptcy Court	for the:	Western	District o	of Pennsy	ylvania										
Case (if kn		19-24152									□ Cł	neck if t	his is a	ın amen	ded f	iling	
	al Form 12 apter	^{22C-2} 13 Calcu	latior	ı of Y	our [Dispo	osab	le Ir	ncoi	me						(04/19
		orm, you will ne eriod (Official F			ed copy o	of Chap	ter 13 S	tateme	ent of \	Your Cu	rrent Mon	thly Inc	ome an	d Calcul	ation	of	
space	e is neede	and accurate a d, attach a sepa s, write your na	rate she	et to this	form, Inc	clude th											re
Part	1: Cal	culate Your Dec	ductions	from You	ur Incom	ie											
the	e question	Revenue Servions in lines 6-15. May also be ava	To find t	he IRS st	tandards	, go onli	ine usin										
ex	penses if th	xpense amounts hey are higher th do not deduct a	an the st	andards.	Do not in	clude an	ny operat	ting exp	enses	that you	ı subtracte	ed from i	ncome				า
If y	our expen	ses differ from m	onth to m	nonth, ent	ter the av	erage ex	xpense.										
No	ote: Line nu	ımbers 1-4 are n	ot used ir	n this form	n. These r	numbers	s apply to	o inform	nation i	required	by a simila	ar form ι	ised in	chapter 7	case:	s.	
5.	The nur	mber of people	used in d	determini	ing your	deduction	ons fror	m inco	me								
	plus the	e number of peo number of any a ber of people in	additional	depende								n		2			
Na	itional Sta	ndards	You mu	st use the	e IRS Nati	ional Sta	andards t	to answ	ver the	question	ns in lines	6-7.					
6.		lothing, and oth ds, fill in the dolla							I in line	e 5 and th	ne IRS Na	tional		\$		1,288.0	00
7.	the dolla people v	pocket health car ar amount for out who are 65 or old han this IRS amo	-of-pocke derbeca	et health o use older	care. The people h	number ave a hiç	of peopl gher IRS	le is spl allowa	lit into t ance fo	two cate	goriespe	ople who	are ur	nder 65 a	nd		

Official Form 122C-2

Desc Main

Case 19-24152-JAD Doc 25 Filed 11/21/19 Entered 11/21/19 15:49:47 Page 38 of 50 Document 19-24152 Gary M. Fieber Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 110.00 Copy here=> 110.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 110.00 110.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 598.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 984.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Repeat this amount 4.905.83

Name of the creditor	Avera paym	ige monthly ent	
Select Portfolio Servicing	\$	4,905.83	
9b. Total average monthly payment	\$	4,905.83	Copy here=>

9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

\$	0.00	Copy here=>	\$	0.00
· ———		11010	٠.	

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

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\$	U	١.,	JU	Į

on line 33a.

Explain why:

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Gary M. Fieber 19-24152 Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 237.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 Describe Vehicle 1: 2011 Chevrolet Impala 165,000 miles Location: 102 Golden Eagle Drive, Venetia PA 15367 13a. Ownership or leasing costs using IRS Local Standard..... 508.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment Credit Acceptance Corp. 357.00 Repeat this Copy amount on Total Average Monthly Payment 357.00 357.00 here => 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 151.00 151.00 \$ \$ Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Copy Repeat this here amount on line Total average monthly payment 0.00 Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Debtor 1 Gary M. Fieber Case number (if known) 19-24152

		n addition to the expense dhe following IRS categories		s listed above	, you are allowed your monthly expenses	for	
16.	5. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.						0.00
17.	Involuntary deductions: The contributions, union dues, are	, , ,	uctions th	at your job re	quires, such as retirement		
			, such a	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	ents that you make for your life insurance on your depe	spouse's	s term life insu	e insurance. If two married people are rance. I spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: administrative agency, such Do not include payments on	as spousal or child support	paymen	is.	by the order of a court or You will list these obligations in line 35.	\$	0.00
20.	Education: The total month	y amount that you pay for e	ducation	that is either	required:		
	as a condition for your job	o, or					
	for your physically or mer	ntally challenged dependent	child if r	o public educ	ation is available for similar services.	\$	0.00
21.	Childcare: The total monthly Do not include payments for			-	sitting, daycare, nursery, and preschool.	\$	0.00
22.	that is required for the health by a health savings account.	and welfare of you or your Include only the amount the	depende at is mor	ents and that is e than the tota		¢	0.00
-00	Payments for health insuran	•		•		\$	0.00
23.	for you and your dependents phone service, to the extent income, if it is not reimburse	s, such as pagers, call waitir necessary for your health and d by your employer.	ng, caller nd welfa	identification, e or that of yo	you pay for telecommunication services special long distance, or business cell our dependents or for the production of		
	expenses, such as those rep				rvice. Do not include self-employment ount you previously deducted.	+\$	0.00
24.	Add all of the expenses all	orted on line 5 of Official Fo	orm 1220	C-1, or any am		+ \$\$	2,384.00
		orted on line 5 of Official Fo	orm 1220 nse alloveductions	c-1, or any am vances. s allowed by the	ount you previously deducted.		
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	owed under the IRS exper These are additional de Note: Do not include are	orm 1220 nse alloveductions ny expeni	c-1, or any am wances. s allowed by the se allowances ccount expen	ount you previously deducted.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance	owed under the IRS exper These are additional de Note: Do not include are	orm 1220 nse alloveductions ny expeni	c-1, or any am wances. s allowed by the se allowances ccount expen	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents.	owed under the IRS exper These are additional de Note: Do not include are	nse allow eductions ny expen avings ac unts that	vances. s allowed by the se allowances. ccount expenare reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents. Health insurance	oved under the IRS exper These are additional de Note: Do not include are y insurance, and health sace, and health savings accord	nse alloweductions by expensions are that	vances. s allowed by the se allowances ccount expender reasonab	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, your dependents. Health insurance Disability insurance	oved under the IRS exper These are additional de Note: Do not include are y insurance, and health sace, and health savings accord	orm 1220 nse allow eductions ny expen ivings a unts that	vances. s allowed by the se allowances are reasonab 115.00 0.00	ne Means Test. s listed in lines 6-24.	\$	
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to	owed under the IRS exper These are additional de Note: Do not include ar insurance, and health sa ie, and health savings accord	orm 1220 nse allow eductions ny expen ivings a unts that	vances. s allowed by the se allowances are reasonab 115.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Is less. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,384.00
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total	owed under the IRS exper These are additional de Note: Do not include ar insurance, and health sa ie, and health savings accord	orm 1220 nse allow eductions ny expen ivings a unts that	vances. s allowed by the se allowances are reasonab 115.00 0.00 0.00	ne Means Test. Is listed in lines 6-24. Is less. The monthly expenses for health ly necessary for yourself, your spouse, o	\$	2,384.00
Add	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason	owed under the IRS exper These are additional de Note: Do not include ar insurance, and health sa ie, and health savings accord tal amount? u actually spend? the care of household or mable and necessary care as if your immediate family who	eductions by expensivings a sunts that \$ \$ family I and suppo is unab	vances. s allowed by the se allowances are reasonabeed. 115.00 0.00 115.00 115.00 members. The ort of an elder olde to pay for s	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health lightly necessary for yourself, your spouse, of the country of the countr	\$	2,384.00
25. 26.	Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this to No. How much do you yes Continued contributions to continue to pay for the reason your household or member of include contributions to an ail Protection against family were reserved.	owed under the IRS exper These are additional de Note: Do not include ar y insurance, and health sace, and health sace, and health savings according to the care of household or mable and necessary care as of your immediate family who count of a qualified ABLE priolence. The reasonably necessary care and the count of a qualified ABLE priolence. The reasonably necessary care and the count of a qualified ABLE priolence. The reasonably necessary care and the count of a qualified ABLE priolence.	eductions by expensivings accounts that	vances. s allowed by the se allowances count expensare reasonabes. 115.00 0.00 115.00 115.00 members. The ort of an elder le to pay for separate	count you previously deducted. The Means Test. Is listed in lines 6-24. Inses. The monthly expenses for health lightly necessary for yourself, your spouse, of the country of the countr	\$s	2,384.00

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ebtor 1	Gary M. Fieber	Case	e number (<i>if kno</i>	own)	19-2	4152		
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	and operat	ing	expens	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy cost ergy costs	s included in	n ex	penses	on line)	
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must sry.	show that the	e ad	ditional		\$	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your depublic elementary or secondary school.	ren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (r ars old to at	not r	more that d a priva	an ate or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must e ot already accounted for in lines 6-23.	explain why	the	amount			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or aft	ter the date	of a	djustme	ent.	\$	0.00
		ne monthly amount by which your actual food allowances in the IRS National Standards. The in the IRS National Standards.						
		onal allowance, go online using the link speci to be available at the bankruptcy clerk's office		ера	rate			
	You must show that the additional amount	claimed is reasonable and necessary.					\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	amount that you will continue to contribute in nization. 11 U.S.C. § 548(d)(3) and (4).	the form of	cas	h or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.					\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.					\$_	115.00
Dedu	ictions for Debt Payment							
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home r 33a through 33e.	mortgages,	vel	nicle			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually duenkruptcy. Then divide by 60.	e to each se	cure	ed			
	Mortgages on your home						Avera	age monthly
33a.	Copy line 9b here					=>	\$	4,905.83
	Loans on your first two vehicles							,
33b.	Ones Para 40h hama					=>	\$	357.00
33c.						=>	\$	0.00
33d.	List other secured debts:						· —	
	e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude tax nsuranc	es		
					No			
	-NONE-				Yes		\$	
				_			–	
					No			
					Yes		\$	
					No			
					Yes	+	\$	
						7	*=	
33e	Total average monthly payment. Add lines	33a through 33d	\$5	5,26	2.83	Copy total here=		5,262.83

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Gary M. Fieber Case number (if known) 19-24152 Debtor 1 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount $\div 60 = \$$ -NONE-\$ Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 33.054.89 ÷ 60 550.92 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total Average monthly administrative expense here=> 5,813.75 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 2,384.00 expense allowances Copy line 32, All of the additional expense deductions 115.00 Copy line 37, All of the deductions for debt payment 5,813.75 8,312.75 8,312.75 Copy total here=> Total deductions.....

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Gary M. Fieber Case number (if known) 19-24152 Debtor 1 Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) Part 2: 39. Copy your total current monthly income from line 14 of Form 122C-1, Chapter 13 6.500.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably 0.00 necessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as 0.00 specified in 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => 8,312.75 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Сору 0.00 0.00 Total \$ here=> \$ Copy 44. **Total adjustments.** Add lines 40 through 43. 8.312.75 8,312.75 here=> -\$ -1,812.75 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Line Reason for change Date of change Increase or Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ Decrease □ 122C-2 ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ■ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Decament 1 age 11 or co					
Debtor 1	Gary M. Fieber	Case	e number (if known)	19-24152	
Part 4:	Sign Below				
E	By signing here, under penalty of perjury you declare	that the information on this statemen	nt and in any atta	schments is true and correct.	
X	/s/ Gary M. Fieber				
	Gary M. Fieber Signature of Debtor 1				
	November 21, 2019 MM / DD / YYYY				

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 19-24152-JAD Doc 25 Filed 11/21/19 Entered 11/21/19 15:49:47 Desc Main

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

In	re	Gary M. Fieber		Case No.	19-24152
			Debtor(s)	Chapter	13
		DISCLOSURE OF COMPE	NSATION OF ATTORN	EY FOR DE	EBTOR(S)
1.	cor	rsuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016 appensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy, or	agreed to be paid	to me, for services rendered or to
		For legal services, I have agreed to accept		\$	4,000.00
		Prior to the filing of this statement I have received		\$	1,200.00
		Balance Due		\$	2,800.00
2.	\$_	310.00 of the filing fee has been paid.			
3.	Th	e source of the compensation paid to me was:			
		■ Debtor □ Other (specify):			
4.	Th	e source of compensation to be paid to me is:			
		■ Debtor □ Other (specify):			
5.		I have not agreed to share the above-disclosed comp	pensation with any other person unl	ess they are memb	bers and associates of my law firm.
		I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na			
6.	In	return for the above-disclosed fee, I have agreed to re	ender legal service for all aspects of	f the bankruptcy c	ase, including:
	b.	Preparation and filing of any petition, schedules, star Representation of the debtor at the meeting of credit [Other provisions as needed]			rings thereof;
7.	Ву	agreement with the debtor(s), the above-disclosed feeling feels shall be billed at an hourly rate of sexceed \$4,000.00, Client hereby agrees the Court by Firm. Client also agrees to approved sums if necessary and applic	t executed by counsel and del \$250.00 and billed at a 1/10th I and consents to any applicati to the modification of the Chap	otor are incorpo nour. Should th on for addition	ne hourly attorney's fees all attorney's fees filed with
			CERTIFICATION		
this	I ce s ban	ertify that the foregoing is a complete statement of an kruptcy proceeding.	y agreement or arrangement for pa	yment to me for re	epresentation of the debtor(s) in
	Nov	rember 21, 2019	/s/ Brian C. Thomps	on. Esquire	
	Date		Brian C. Thompson		197
			Signature of Attorney Thompson Law Gro	up. P.C.	
			125 Warrendale-Bay		
			Suite 200	96	
			Warrendale, PA 150 724-799-8404 Fax:		
			bthompson@thomp		om
			Name of law firm		

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United States Bankruptcy Court Western District of Pennsylvania

In re	Gary M. Fieber		Case No.	19-24152	
		Debtor(s)	Chapter	13	

VERIFICATION OF CREDITOR MATRIX

The abo	ove-named Debtor hereby verifies	that the attached list of creditors is true and correct to the best of his/her knowledge.
Date:	November 21, 2019	/s/ Gary M. Fieber
		Gary M. Fieber
		Signature of Debtor